## BANKRUPTCY ADMINISTRATOR WESTERN DISTRICT OF NORTH CAROLINA

402 West Trade Street, Suite 200 Charlotte, NC 28202 704-350-7587 (main) www.ncwba.uscourts.gov



## **Facilitator Application Instructions**

The Bankruptcy Administrator for the Western District of North Carolina is accepting applications from individuals interested in serving as a Facilitator for the Western District of North Carolina's new Loan Modification Management Program ("LMM Program").

Under the LMM Program Procedures, the Facilitator is defined as follows:

An independent, nonpartisan attorney, licensed to practice law in North Carolina and admitted to the Western District of North Carolina, who has demonstrable skill and experience in consumer bankruptcy loss mitigation to assist the Bankruptcy Court with facilitating compliance by the parties with the LMM.

- i. Without limiting the generality of the foregoing, a Facilitator should:
  - 1. Have experience in the practice of consumer bankruptcy in the Western District of North Carolina, as an attorney representing consumer debtors or mortgage servicers or as a trustee;
  - 2. Have knowledge of the forms and supporting documents required by Creditors to complete a loss mitigation analysis;
  - 3. Have understanding of the various loss mitigation programs offered by Creditors and the terms of their availability to Debtors;
  - 4. Have the ability to accept electronic payment for the Facilitator Fee;
  - 5. Have competence in computer technology and use of the Portal; and
  - 6. Have sufficient staff dedicated to the LMM to ensure oversight of submission of documents to the Portal by the Required Parties and compliances with these procedures.
- ii. The Office of the United States Bankruptcy Administrator for the Western District of North Carolina (the "BA") shall maintain and publish a list of approved Facilitators, as well as an application to be approved to serve as a Facilitator. In conjunction with the Clerk of Court for the United States Bankruptcy Court for the Western District of North Carolina, the BA will supervise the assignment of an approved Facilitator to a Debtor who initiates the LMM.

Individuals interested in applying should familiarize themselves with the LMM Program Procedures. Qualified persons may apply by forwarding the following application to <a href="mailto:applications@ncwba.uscourts.gov">applications@ncwba.uscourts.gov</a>. No mailed applications, please. Depending on the number of applications received, the BA may communicate only with candidates selected for an interview.

While the BA may only appoint two individuals to serve as a Facilitator at this time, applicants may be contacted in the future to serve as a Facilitator in the event that the volume of cases seeking to use the LMM Program increases.

## Facilitator Application Loan Modification Management Program Western District of North Carolina



Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

## **Personal Information**

Name							
Address		City		State	ZIP		
Email address		Phone Number					
Are you are a member in good standing of the NC Bar? Yes	NC State Bar No. Are y Distri		Are you admitted to District of North Car	e you admitted to practice in the Western trict of North Carolina? Yes No			
Are you certified as a bankrupto  NC Consumer NC Busines			Are you certified as a mediator by the NC Bar? Yes No				
Describe your mediation experience (attach additional page(s) as necessary).							
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Education							
School name	Location	Years attende	ed	Degree received	Major		
_							
References							
Name		Title		Company	Phone		

Employer (1)	Job title		Dates employed			
Address	City	State	Zip			
Employer (2)	Job title		Dates employed			
Address	City	State	Zip			
Employer (3)	Job title		Dates employed			
Address	City	State	Zip			
Employer (4)	Job title		Dates employed			
Address	City	State	Zip			
Facilitator Qualifications						
Why are you interested in being a Facilitator for the WDNC Loan Modification Mediation Program? Provide any information you believe will be helpful in evaluating your application (attach additional page(s) as necessary).						
Described your skill and experience in consumer bankruptcy loss mitigation.						
Do you routinely represent any financial institutions or servicers that will present a conflict of interest that will require you to reject an appointment to serve as Facilitator? Yes No If yes, please provide names of these clients.						
Signature						
I certify that my answers are true and complete to the best of my knowledge.						
Name (please print)	Signature					
Date						

**Employment History**